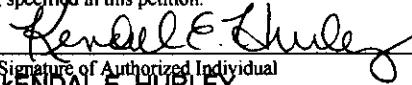


B1 (Official Form 1) (4/10)

UNITED STATES BANKRUPTCY COURT Southern District of Nevada																										
Name of Debtor (if individual, enter Last, First, Middle): St. Cloud Hotel and Casino, Inc.	Name of Joint Debtor (Spouse) (Last, First, Middle): NONE																									
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): NONE	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): SEP 1 2 15 PM '10																									
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): 20-0104347	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): U.S. BANKRUPTCY COURT MARY A. SCHOTT, CLERK																									
Street Address of Debtor (No. and Street, City, and State): 4982 Shirley Street Las Vegas, NV	Street Address of Joint Debtor (No. and Street, City, and State): N/A																									
ZIP CODE 89119	ZIP CODE																									
County of Residence or of the Principal Place of Business: CLARK	County of Residence or of the Principal Place of Business:																									
Mailing Address of Debtor (if different from street address): P. O. Box 71287 Las Vegas, NV	Mailing Address of Joint Debtor (if different from street address): N/A																									
ZIP CODE 89170	ZIP CODE																									
Location of Principal Assets of Business Debtor (if different from street address above):																										
ZIP CODE																										
Type of Debtor (Form of Organization) (Check one box.) <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.) <hr/>	Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding																								
		Nature of Debts (Check one box.) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.																								
Filing Fee (Check one box.)		Chapter 11 Debtors Check one box: <input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (<i>amount subject to adjustment on 4/01/13 and every three years thereafter</i>).																								
<input checked="" type="checkbox"/> Full Filing Fee attached. <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).																								
Statistical/Administrative Information				THIS SPACE IS FOR COURT USE ONLY																						
<input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.																										
Estimated Number of Creditors <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">1-49</td> <td style="width: 10%;"><input checked="" type="checkbox"/></td> <td style="width: 10%;"><input type="checkbox"/></td> </tr> <tr> <td></td> <td>50-99</td> <td>100-199</td> <td>200-999</td> <td>1,000-5,000</td> <td>5,001-10,000</td> <td>10,001-25,000</td> <td>25,001-50,000</td> <td>50,001-100,000</td> <td>Over 100,000</td> <td></td> </tr> </table>				1-49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	Over 100,000		
1-49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																
	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	Over 100,000																	
Estimated Assets <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">\$0 to \$50,000</td> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 10%;"><input checked="" type="checkbox"/></td> <td style="width: 10%;"><input type="checkbox"/></td> </tr> <tr> <td></td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1 million to \$10 million</td> <td>\$10 million to \$50 million</td> <td>\$50 million to \$100 million</td> <td>\$100 million to \$500 million</td> <td>\$500 million to \$1 billion</td> <td>\$1 billion to \$5 billion</td> <td>More than \$5 billion</td> </tr> </table>				\$0 to \$50,000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1 million to \$10 million	\$10 million to \$50 million	\$50 million to \$100 million	\$100 million to \$500 million	\$500 million to \$1 billion	\$1 billion to \$5 billion	More than \$5 billion					
\$0 to \$50,000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																
	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1 million to \$10 million	\$10 million to \$50 million	\$50 million to \$100 million	\$100 million to \$500 million	\$500 million to \$1 billion	\$1 billion to \$5 billion	More than \$5 billion																
Estimated Liabilities <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">\$0 to \$50,000</td> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 10%;"><input checked="" type="checkbox"/></td> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 10%;"><input type="checkbox"/></td> </tr> <tr> <td></td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1 million to \$10 million</td> <td>\$10 million to \$50 million</td> <td>\$50 million to \$100 million</td> <td>\$100 million to \$500 million</td> <td>\$500 million to \$1 billion</td> <td>\$1 billion to \$5 billion</td> <td>More than \$5 billion</td> </tr> </table>				\$0 to \$50,000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1 million to \$10 million	\$10 million to \$50 million	\$50 million to \$100 million	\$100 million to \$500 million	\$500 million to \$1 billion	\$1 billion to \$5 billion	More than \$5 billion		
\$0 to \$50,000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																	
	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1 million to \$10 million	\$10 million to \$50 million	\$50 million to \$100 million	\$100 million to \$500 million	\$500 million to \$1 billion	\$1 billion to \$5 billion	More than \$5 billion																

B1 (Official Form 1) (4/10)

Voluntary Petition <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): St. Cloud Hotel and Casino, Inc.	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.)			
Location Where Filed: N/A	Case Number: N/A	Date Filed:	
Location Where Filed: N/A	Case Number: N/A	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet.)			
Name of Debtor: N/A	Case Number: N/A	Date Filed:	
District: Southern District of Nevada	Relationship: N/A	Judge:	
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.)	
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b). X _____ Signature of Attorney for Debtor(s) (Date)	
Exhibit C			
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?			
<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
Exhibit D			
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)			
<input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.			
If this is a joint petition:			
<input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
Information Regarding the Debtor - Venue (Check any applicable box.)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)			
(Name of landlord that obtained judgment)			
(Address of landlord)			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

Voluntary Petition <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): St. Cloud Hotel and Casino, Inc.
Signatures		
Signature(s) of Debtor(s) (Individual/Joint) <p>I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X NOT APPLICABLE</p> <p>Signature of Debtor</p> <p>X</p> <p>Signature of Joint Debtor</p> <p>Telephone Number (if not represented by attorney)</p> <p>Date</p>		Signature of a Foreign Representative <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X NOT APPLICABLE</p> <p>(Signature of Foreign Representative)</p> <p>(Printed Name of Foreign Representative)</p> <p>Date</p>
<p>Signature of Attorney*</p> <p>X WILL OBTAIN ONE WITHIN 14 DAYS</p> <p>Signature of Attorney for Debtor(s)</p> <p>Printed Name of Attorney for Debtor(s)</p> <p>Firm Name</p> <p>Address</p> <p>Telephone Number</p> <p>Date</p>		<p>Signature of Non-Attorney Bankruptcy Petition Preparer</p> <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p>NONE</p> <p>Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>Address</p> <p>Date</p>
<p>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</p> <p>Signature of Debtor (Corporation/Partnership)</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X </p> <p>Signature of Authorized Individual KENDAL E. HURLEY</p> <p>Printed Name of Authorized Individual</p> <p>Title of Authorized Individual 09/01/2010</p> <p>Date</p>		<p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</i></p>

Official Form 2
6/90

**DECLARATION UNDER PENALTY OF PERJURY
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, [the president *or* other officer *or* an authorized agent of the corporation] [*or* a member *or* an authorized agent of the partnership] named as the debtor in this case, declare under penalty of perjury that I have read the foregoing [*list or schedule or amendment or other document (describe)*] and that it is true and correct to the best of my information and belief.

Date 9/1/10

Signature Kendal E. Hurley

Kendal E. Hurley, Treasurer
(Print Name and Title)

B4 (Official Form 4) 12/07

UNITED STATES BANKRUPTCY COURT
Southern District of Nevada

In re St. Cloud Hotel and Casino, Inc.Case: _____
Chapter 11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (12) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initial and the name and address of the child's parent or guardian, such as "A.B.", a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

1	2	3	4	5
<i>Name of creditor and complete mailing address, including zip code,</i>	<i>Name, telephone number and mailing address, including zip code of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed or subject to setoff</i>	<i>Amount of claim [if secured also state value of security]</i>
Donald K. Reitzfeld 5019 Pickford Way Culver City, CA 90230	Donald K. Reitzfeld 5019 Pickford Way Culver City, CA 90230 (310) 308-0950	First Trust Deed Property APN: 271-110-015 <i>P LVS G WENSLITIP</i>	Disputed	\$280,000.00
Wilma L. Grant 3884 Megginson Lane Riverside, Ca. 92503	Wilma L. Grant 3884 Megginson Lane Riverside, Ca. 92503 (951) 689-4725	Second Deed of Trust Property APN: 271-110-015 (The Stella Rena Craig Trust, Wilma Lee Grant, Trustee, under document dated May 28 th , 1999)	Disputed	\$290,000.00
Farzaneh Roman, Trustee 10501 Wilshire Blvd, Ste 2111 Los Angeles, CA 90024	Farzaneh Roman 10501 Wilshire Blvd, Ste 2111 Los Angeles, CA 90024 (310) 446-4787	Third Deed of Trust Property APN: 271-110-015 (Farzaneh Roman Living Trust Dated March 20, 2007) <i>P LVS on N E S L I T I P</i>	Disputed	\$168,000.00
Riverside County Treasurer P.O. Box 12005 Riverside, CA 92502-2205	Riverside County Treasurer P.O. Box 12005 Riverside, CA 92502 (951) 955-3900	Property Taxes Property APN: 271-110-015	Contingent	Approximately \$9,000.00
Thomas Reeks 1553 W. Kenneth Road Glendale, CA 91201 (602) 403-7568	Thomas Reeks 1553 W. Kenneth Road Glendale, CA 91201 (602) 403-7568	First & Second Trust Deed on Currie, Nevada Property. APNs:009-03B-003 & 009-03B-006	Contingent	\$120,000.00
Glenn Taylor P.O. Box 444 Fountain Green, UT 84632	Glenn Taylor P.O. Box 444 Fountain Green, UT 84632 (775) 934-2328	Third Trust Deed on Currie, Nevada Property. APNs:009-03B-003 & 009- 03B-006	Disputed	\$200,000.00

Date: 9/1/10Debtor: ST. CLOUD HOTEL AND CASINO, INC.*[Declaration as in Form 2]*